



Glenn Grieb
Plant Manager
VEOLIA WATER NORTH AMERICA

KinBuc Landfill Treatment Plant
383 Meadow Road
Edison, NJ 08817
www.veoliawatema.com

October 15th, 2004

Ms. Grissel V. Diaz-Cotto
Emergency and Remedial Response Division
United States Environmental Protection Agency
Region II
290 Broadway, 19th Floor
New York, NY 10007-1866

Re: September 2004 Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site

Dear Ms. Diaz-Cotto:

The September 2004 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site, prepared by Veolia Water Operating Services is attached.

Should you have any questions concerning the DMR or other site items, please contact me at your earliest convenience at the Kin-Buc site.

Very truly yours,
Veolia Water Operating Services
On behalf of SCA Services, Inc.,

Glenn Grieb
Plant Manager

Enclosure

cc: Martha Goodwin – NJDEP
Stephen Joyce – SCA Holding
Carl Januszkiewicz – Waste Management
Richard Hoyt – Veolia Water NA OS



307567



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDDES NO.
* NJ Permit Equivalent

REPORTING PERIOD
M o. Y r. M o. Y r.
0 9 0 4 0 9 0 4

PERMITTEE: Name: SCA Services, Inc.
 Address: 383 Meadow Road
 Edison, New Jersey 08817

FACILITY: Name: Kin-Buc Landfill
 Address: 383 Meadow Road
 Edison, New Jersey 08817
 Telephone: 732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY
__ T-VWX-007 __ T-VWX-008 __ T-VWX-009
__ EPA Form 3320-1

DYE TESTING YES NO
 __ X

SLUDGE REPORT-INDUSTRIAL
__ T-VWX-010A __ T-VWX-010B

TEMPORARY BYPASSING __ X

DISINFECTION INTERRUPTION __ X

WASTEWATER REPORTS
__ T-VWX-011 __ T-VWX-012 __ T-VWX-013

MONITORING MALFUNCTIONS __ X

UNITS OF OPERATION __ X

GROUNDWATER REPORTS
__ T-VWX-015(A,B) __ T-VWX-016 __ T-VWX-017
__ ELECTRONIC SUBMISSION

OTHER __ X

NPDES DISCHARGE MONITORING
__ 1 EPA Form 3320-1

(Detail any "Yes" on reverse side in appropriate space.)

NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Glenn Grieb
Grade & Registry No. N-4 / 0021212
Signature *Glenn Grieb*

Name (Printed) Glenn Grieb
Title (Printed) Plant Operations Manager
Signature *Glenn Grieb*

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

FACILITY

LOCATION

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY
04 09 01

YEAR MO DAY
04 09 30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.023739	0.037101	MGD	*****	*****	*****	***	***	continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****				
pH	SAMPLE MEASUREMENT	*****	*****	***	7.60	*****	8.05	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		8.0	*****	8.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT	*****	*****	***	*****	1.2	1.4	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15			2/month	grab
COD	SAMPLE MEASUREMENT	13.43	16.56	kg/day	*****	150	153	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD	SAMPLE MEASUREMENT	*****	*****	***	*****	<5.00	<5.00	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	comp.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.66	1.32	kg/day	*****	6.41	10.00	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	***	7.11	*****	8.03	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		4.0 MIN. instantaneous	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		04 10 15		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR MO DAY		
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)									

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

FACILITY

LOCATION

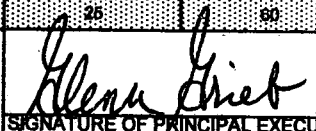
ATTN:

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORTNJ PERMIT EQUIVALENT
PERMIT NUMBER001
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
04	09	01	04	09	30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS							
BENZENE	SAMPLE MEASUREMENT	<0.0000268	<0.0000325	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT	0.008	0.02		*****	62	134								
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.0000268	<0.0000325	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT	0.022	0.068		*****	142	280								
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.0000358	<0.0000433	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT	0.003	0.006		*****	22	58								
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.0000268	<0.0000325	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT	0.022	0.068		*****	142	280								
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000358	<0.0000433	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT	0.008	0.025		*****	62	184								
TOLUENE	SAMPLE MEASUREMENT	<0.0000268	<0.0000325	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT		0.011		*****	28	74								
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000268	<0.0000325	kg/day	*****	<0.30	<0.30	ug/L	0	2/month	grab				
	PERMIT REQUIREMENT	0.004	0.009		*****	25	60								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE						
Glenn Grieb Project Manager							732 572-4743		04 10 15						
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383 MEADOW ROAD
EDISON, NEW JERSEY 08817

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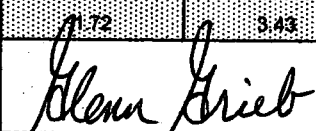
LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
04	09	01		04	09	30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000358	<0.0000433	kg/day	*****	<0.40	<0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	28	89			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.0000407	<0.0000530	kg/day	*****	<0.40	<0.40	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.018		*****	52.8	108			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.0000081	<0.0000091	kg/day	*****	<0.092	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.0000214	<0.0000216	kg/day	*****	<0.250	<0.300	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00082		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.0000087	<0.0000104	kg/day	*****	<0.098	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00082		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.0000074	<0.0000078	kg/day	*****	<0.086	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00082		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.0000214	<0.0000216	kg/day	*****	<0.250	<0.300	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
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Glenn Grieb Project Manager								732 572-4743		04 10 15	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

<0.00017

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
04	09	01		04	09	30

PARAMETER		QUANTITY OR LOAD			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.0000087	<0.0000104	kg/day	*****	<0.088	<0.100	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
PHENANTHRENE	SAMPLE MEASUREMENT	<0.0000119	<0.0000141	kg/day	*****	<0.13	<0.2	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab
ALDRIN	SAMPLE MEASUREMENT	<0.0000009	<0.0000011	kg/day	*****	<0.010	<0.010	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.000133	0.00028		*****	0.0075	0.176			monthly	grab
4,4-DDT	SAMPLE MEASUREMENT	<0.0000010	<0.0000013	kg/day	*****	<0.010	<0.010	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.0000578	0.000148		*****	0.38	0.765			weekly	grab
PCB-1242	SAMPLE MEASUREMENT	<0.0000203	<0.0000265	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1248	SAMPLE MEASUREMENT	<0.0000305	<0.0000397	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
PCB-1254	SAMPLE MEASUREMENT	<0.0000203	<0.0000265	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years) (REFERENCE ALL ATTACHMENTS HERE)					TELEPHONE		DATE		
Glenn Grieb Project Manager							732 572-4743		04 10 15		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS											

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY

LOCATION

ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY
04 09 01

TO

YEAR MO DAY
04 09 30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PCB-1260	SAMPLE MEASUREMENT	<0.0000305	<0.0000397	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
ARSENIC	SAMPLE MEASUREMENT	0.0005150	0.0006224	kg/day	*****	5.10	5.70	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.013	0.026		*****	85.8	172			weekly	comp
CADMIUM	SAMPLE MEASUREMENT	<0.0000610	<0.0000795	kg/day	*****	<0.60	<0.60	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	112			weekly	comp
CHROMIUM	SAMPLE MEASUREMENT	0.0002571	0.0004503	kg/day	*****	2.43	3.40	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.030	0.080		*****	188	396			weekly	comp
COPPER	SAMPLE MEASUREMENT	0.0003190	0.0004238	kg/day	*****	3.09	3.90	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
LEAD	SAMPLE MEASUREMENT	0.0001421	0.0002119	kg/day	*****	1.38	1.60	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
NICKEL	SAMPLE MEASUREMENT	0.0022191	0.0039066	kg/day	*****	20.6	29.5	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.140	0.281		*****	824	1850			weekly	comp
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Glenn Grieb Project Manager						Glenn Grieb		732 572-4743		04 10 15	
TYPED OR PRINTED		AREA CODE		NUMBER		YEAR		MO		DAY	

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

NAME
ADDRESSSCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817FACILITY
LOCATION
ATTN:KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZNATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORTNJ PERMIT EQUIVALENT
PERMIT NUMBER001
DISCHARGE NUMBER

MONITORING PERIOD

YEAR MO DAY
04 09 01

TO

YEAR MO DAY
04 09 30

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC	SAMPLE MEASUREMENT	0.0016990	0.0026883	kg/day	*****	16.3	20.3	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.177	0.356		*****	1170	2360			weekly	comp
CYANIDE	SAMPLE MEASUREMENT	0.0010825	0.0015891	kg/day	*****	10.5	12.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.002	0.004		*****	13.2	28.4			weekly	comp
ALUMINUM	SAMPLE MEASUREMENT	<0.0059556	<0.0077603	kg/day	*****	<58.6	<58.6	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	1.45	2.81		*****	9240	18500			weekly	comp
IRON	SAMPLE MEASUREMENT	<0.0037705	<0.0049131	kg/day	*****	<37.1	<37.1	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	80.6	162		*****	552000	1070000			weekly	comp
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT	QUARTELY	REPORT	---	N/A	*****	*****	%	0		
	PERMIT REQUIREMENT	*****	*****		50(g)	*****	*****			see permit	equivalent
Ammonia	SAMPLE MEASUREMENT	*****	*****	---	*****	0.210	0.320	mg/l	0	*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	4.0	10.0			2/month	comp
	SAMPLE MEASUREMENT	*****	*****	---	*****	*****	*****	---	---	*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****
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Glenn Grieb Project Manager						732 572-4743		04 10 15			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	
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